

## ***Terms***

**Abstinence** - The practice of refraining from the consumption or use of alcohol and other intoxicating substances.

**Air Force Personnel** - Active duty, Air National Guard, Air Force Reserve personnel, and civilian employees of the United States Air Force.

**Alcohol Abuse** - Any substandard behavior or performance in which the consumption of alcohol is a primary contributing factor. This definition should not be confused with the diagnosis of Alcohol Abuse as outlined in the DSM.

**Alcohol Related Misconduct** - This type of conduct includes driving while intoxicated, public incidents of intoxication and misconduct, under-age drinking, or similar offenses and is a breach of discipline.

**Alcoholism** - A primary, chronic disease with genetic, psychosocial, and environmental factors influencing its development and manifestations. The disease is often progressive and fatal. It is characterized by:

**Antisocial Personality** - A personality style characterized by attitudes and overt behavior contrary to the customs, standards, and moral principles accepted by society.

**At-Risk** - Designates individuals displaying risk factors that potentially place them at some risk for self-harm or acting to harm others.

**Bipolar Disorder** - A mood disorder that causes radical emotional changes and mood swings, from manic highs to depressive lows.

**Buddy Care** - Individuals taking care of their buddies, friends, or co-workers. Relating to suicide prevention, it means co-workers learning what risk factors to look for, and bringing at-risk individuals to the attention of their supervisor.

**Civilian** - When used in reference to FAP staff applies to GS/NSPS and contract employees.

**Clinical Treatment** - Services designed for the treatment of patients diagnosed with alcohol abuse or alcohol dependence. These services include a wide range of programs including intensive outpatient treatment, partial hospitalization, variable length of stay programs, and inpatient hospitalization.

**Community Outreach** - Defined as on and off base prevention, drug education/awareness and deterrence activities targeted to DoD family members, retirees, civilians and contractors.

**Drug** - Any controlled substance included in Schedules I, II, III, IV, and V in 21 U.S.C. 812, including anabolic or androgenic steroids, or any intoxicating substance other than alcohol, that

is inhaled, injected, consumed, or introduced into the body in any manner to alter mood or function.

**Drug Abuse** - The wrongful use, possession, distribution, or introduction onto a military installation, or other property or facility under military supervision, of a controlled substance, prescription medication, over-the-counter medication, or intoxicating substance (other than alcohol). Wrongful means without legal justification or excuse, and includes use contrary to the directions of the manufacturer or prescribing healthcare provider, and use of any intoxicating substance not intended for human ingestion.

**Hypervigilance** - A state of enhanced sensory sensitivity accompanied by an exaggerated intensity of behaviors whose purpose is to detect threats. Hypervigilance is also accompanied by a state of increased anxiety and a constant scanning of the environment for threats.

**Health Care Provider** - Someone who provides direct health care services to military health system beneficiaries in military medical treatment facilities.

**Helping Professionals** - Includes, but is not limited to: mental health, chaplains, family support, family advocacy, law enforcement, legal personnel, health promotions, substance abuse, drug demand reduction, social actions, youth programs, and senior enlisted advisor personnel.

**Imminent Dangerous** - A clinical finding or judgment by a privileged, doctoral-level mental health care provider based on a comprehensive mental health evaluation that an individual is at substantial risk of committing an act or acts in the near future that would result in serious personal injury or death to himself, herself, another person or persons, or of destroying property under circumstances likely to lead to serious personal injury, or death, and that the individual manifests the intent and ability to carry out that action. A violent act of a sexual nature is considered an act that would result in serious personal injury.

**Integrated Delivery System (IDS)** - The coordinating body, usually working as a committee within the Community Action Information Board, that integrates helping resources for people within the base community.

**Intervention** - The process of helping the member recognize at the earliest possible moment that he or she needs treatment for self-destructive drinking or drug abuse. This professionally structured event includes significant others in the member's life.

**Intoxication** - Maladaptive behavior, such as aggressiveness, impaired judgment, and manifestation of impaired social or occupational functioning, because of recent ingestion, inhalation, or injection of any substance into the body.

**Investigative Interview Hand-Offs** - The Air Force Chief of Staff's 26 Nov 02 Policy for Investigative Interviews Memorandum requires investigative agencies including the Office of Special Investigations, Inspector General, Security Forces, and Equal Employment Opportunity, to make a direct hand off of individuals who have been questioned to member of their chain of command. The individual's unit and command are in the best position to determine how the

person is coping with and responding to the investigation. The commander can request a Command Directed Evaluation (CDE) if the individual is determined to be at risk.

**Leadership Personnel** – Includes all personnel in leadership, supervisory positions and those responsible for services to improve the welfare and/or development of others. This would include, but not be limited to: commanders, first sergeants, supervisory members in the rank of Staff Sergeant or GS-7 and above.

**Limited Privilege Suicide Prevention (LPSP) Program** - The LPSP program was created to identify and treat those who are at increased risk of suicide because of impending disciplinary action under the Uniformed Code of Military Justice (UCMJ). The intent is to encourage help-seeking by reducing barriers to care such as fears that information shared with a counselor could be used against oneself. Information that is protected under this program may not be used in existing or future UCMJ action, or when weighing characterization of service of a member being separated. It is important, however, that providers, patients, and commanders understand the limited nature of protection. Information in the LPSP mental health file can be disclosed to other medical personnel for purposes of medical treatment, a member's confinement military commander, and to other authorized personnel with an official need to know (e.g., commanders). The instruction governing the procedures for the program is AFI 44-109. Procedures for the LPSP program are as follows:

- LPSP applies only to those military members who have been officially notified (written or verbal) that they are under investigation or suspected of violating the UCMJ
- If an individual involved in the processing of the disciplinary action has a "good faith belief" that the member being disciplined may present a risk of suicide, that individual should communicate their concern to the member's commander along with a recommendation for a mental health evaluation under the LPSP program
- The mental health provider (MHP) conducting the evaluation will determine whether the member poses a risk of suicide. Treatment will be initiated as appropriate
- The limited protection offered by this program lasts only so long as the MHP believes there is a continuing risk of suicide
- The MHP will notify the commander when the member no longer poses a risk of suicide
- Members in this program are granted limited protection with respect to the information revealed during or generated by their clinical relationship with the MHP

**Maltreatment** - A general term encompassing child abuse or neglect and spouse abuse or neglect.

**Operating Instruction (OI)** - Technical and policy procedures generated and used by the drug testing laboratory governing specific aspects of specimen analysis.

**Outreach** - Activities in support of maltreatment prevention. Usually provided by the Outreach Program Manager and take the form of primary and secondary prevention activities. Does not include tertiary prevention (usually referred to as maltreatment intervention).

**Outreach Program** - Informational activities designed to heighten awareness of negative effects of drug abuse.

**Paranoia** - A thought process that typically includes persecutory beliefs concerning a perceived threat towards oneself.

**Prevention** - Activities with and for families undertaken prior to the report of abuse. May be primary prevention (activities for all families) or secondary prevention (activities for families identified to be at risk for maltreatment).

**Probable Cause** – (in context with this site) Probable cause exists when there is a reasonable belief that drugs will be found in the system of the member to be tested. See MRE 315(f) and consult with the SJA regarding procedures for determining whether there is probable cause. Results may be used for UCMJ or to characterize administrative discharges.

**Reserve Components (RC)** - Reserve Components of the Armed Forces of the United States are: a. the Army National Guard of the United States; b. the Army Reserve; c. the Naval Reserve; d. the Marine Corps Reserve; e. the Air National Guard of the United States; f. the Air Force Reserve; and g. the Coast Guard Reserve.

**Risk Factors** - Includes, but is not exclusively limited to such factors as relationship difficulties, substance abuse, legal, financial, medical, mental health, and occupational problems, along with depression, social isolation, and previous suicide threats/gestures which may increase the probability of self-harm.

**Stressor** - An agent, condition, experience or other stimulus that causes stress.

**Substance** - Alcohol and other mind or mood altering drugs, including illicit drugs, prescribed medications, and over-the-counter medications.

**Substance Abuse** - The use of any illicit drug or the misuse of any prescribed medication or the abuse of alcohol. “Abuse” refers to any pattern of unconventional misuse of any substance for non-medical purposes that produces a known health risk or constitutes a danger to self or others.

**Tolerance** - The condition in which a person needs increased amounts of a substance to achieve the desired effect or experiences a markedly diminished effect with regular use of same dose.

**Victim Advocate** – An employee of the Department of Defense, a civilian working under contract for the Department of Defense, or a local community VA service agency with a formal MOU with an installation, whose role is to provide comprehensive assistance and liaison to and for victims of domestic abuse and sexual assault, and to educate personnel on the installation regarding the most effective responses to domestic abuse on behalf of victims and at-risk family members.

**Victim Advocacy Services** - Services that are offered to victims of domestic abuse with the goal of increasing victim safety and autonomy. Services shall include, but not necessarily be limited

to: responding to victims' emergency and ongoing safety concerns and needs, providing information about programs and services available to victims and their children both in the civilian and military communities, and providing victims with ongoing support and referrals.

**Victim and Witness Assistance Program (VWAP)** – VWAP attempts to reduce the physical, psychological, and financial hardships suffered by victims and witnesses of offenses investigated by Air Force authorities. The installation commander is the local responsible officer for identifying victims and witnesses of crimes and providing the services required by VWAP. He or she normally delegates this responsibility to the base Staff Judge Advocate.

**Withdrawal** - A substance-specific syndrome that occurs when a person ceases to use or reduces ingestion of a substance that the person previously used regularly to induce a state of intoxication.